

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee National Rifle Association of America		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 24 / 2014
Mailing Address 11250 Waples Mill Road		Amount 4095.54
City Fairfax	State VA	Zip Code 22030
Purpose of Expenditure Salary / Benefits	Category/ Type 001	Transaction ID : 59429556 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Thom Tillis		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Prolist Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 24 / 2014
Mailing Address 8341 Beechcraft Avenue		Amount 604.39
City Gaithersburg	State MD	Zip Code 20879-1509
Purpose of Expenditure Data Match	Category/ Type 004	Transaction ID : 59431160 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Thom Tillis		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	4699.93
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

[Electronically Filed]

Date

MM / DD / YYYY
04 / 25 / 2014

Signature